

### MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

## CANDIDATE COMMITTEE COVER PAGE

Jan 21 10 4- An 10

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by	i	TON OFFICIAL USE ONLY			
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement	covers From: / / 09 to /2 3/ 09 Mo Day Year Mo Day Year			
Committee I.D. Number		Terry L. Including District # or Community Served (If applicable) Township Supervisor			
5. Committee's Mailing Address  93 River Trail Bay City, MI 48706  Area Code and Phone  If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Sheri L.	ne & Residential Address Schumann Ashire Drive MI 48706 e 089)686-8182			
7. Treasurer's Business Address 3535 Old Kawkawlin Road Bay City, MI 48706  Area Code and Phone (989) 686-7680	Diane	ord keeper's Name and Mailing Address (If the committee has a likeeper)  L Clark  E. Fisher  Lty, MI 48706 989-  989-684-2546			
9. TYPE OF STATEMENT					
9a. 🗌 Pre-Election OR 9b. 🗌 Post	-Election	9c. X Annual Statement (2004 Coverage Year)			
Pre-Election or Post-Election Statement relates to:					
☐ Primary ☐ Gene	eral	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)			
☐ Convention ☐ Scho	ool	9e. Dissolution of Candidate Committee			
☐ Special ☐ Caud	cus				
Date of Election, Convention or Caucus		Effective Date of Dissolution			
Month Day Year	·	Month Day Year  By checking this item, I\We certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.			
A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.					
10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of mylour knowledge and belief the contents are true, accurate and complete.  Current Treasurer or Designated Record keeper  Type or Print Name  Signature  Date  Mo Day Year					
Candidate Terry L. Watson Type or Print Name	Signatur	Date Day Year			



### MICHIGAN DEFARIMENT OF STATE **BURGAU OF ELECTIONS**

SUMMARY PAGE CANDIDATE COMMITTEE 2. Committee Name RECEPTS Column I Column II This Period 3. Contributions Cumulative this election cycle a. Itamizad (Schodule 1A - Column 8) (3a.) \$ \_\_\_ b. Unitemized (less than \$20.01 each - no Schedule) (3b) \$\_\_\_NOT APPLICABLE c Subtotal of "Contributions" (3c) \$\_\_\_ 4. Other Receipts (Schedule 1A -1, Column 6) 5, TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line Sc + Line 4) IN-KIND CONTRIBUTIONS & EXPENDITURES 6. In-Kind Contributions (Schodule 1-IK, Gelamn 7) 7. In-Kind Expenditures (Schodule 18-IK, Column 8) EXPENDITURES 8. Exponditures 5000 a. Hemized (Schedule 18, Çolumn 8) b. Remized Get-Out-the-Vote (Schedule 18-G) (8b.) \$ \_ c. Unitemized (less than \$50.01 each - no Schedule) (8g.) \$ \_\_\_ 9. TOTAL EXPENDITURES (Add Line So + Line Sb + Line Sc) 20 00 6761.97 (8) \$ INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Discursements n. itomized (Schedule 1C, Column 6) (10n.) \$ \_\_\_ b. Unitemized (less than \$50.01 each - no Schedule) {10b.) \$ \_ 11. TOTAL INCIDENTAL EXPENSE DISSURSEMENTS (Add Line 10s + Line 10b) CERTS AND OBLIGATIONS 12. Debte and Obligations s. Owed by the Committee (Schedule 1E) b, Owed to the Committee (Schedule 1E) 13. Ending Balance of test report fied (Enter zero if no provious reports have been sted.)

14. Amount received during reporting period
(Line 5, Total Contributions & Other Receipts) (13,) \$ 15. SUCTOTAL Aud lines 13 and 14 18. Amount expended during reporting period (Add lines 6 and 11) 17. ENDING BALANCE (Subtract line 15 from line 15)



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

## ITEMIZED EXPENDITURES **SCHEDULE 1B**

**CANDIDATE COMMITTEE** 

1. Committee I. D. Number	150320	TERRY WATSON FOR
2 Committee Name	BANGOR	TOWNSHIP SUPERVISOR

Name and address of person or vendor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1			
Name BAY CITY DEMOCRAT  Address 309 NINTH ST  BAY CITY MI 48708	Purpose: ADVERTISING	2/	
Address 309 NINTH ST		2/123/19	50 00
BAY CITY MI 48 108	Check box if this expenditure is payment of	, , ,	5000
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name	Purpose:		
Address			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement_		
Expenditure #3			
Name	Purpose:		
Address			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
, Name	Purpose:		
	z <sub>i</sub>		
Address			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5		CANONICA CANADA DE CANADA CASA CASA CASA CASA CASA CASA CASA C	The second secon
Name	Purpose:		
Address			
	Check box if this expenditure is payment of	1	
Fund Raiser	debt or obligation reported on previous statement	ĺ	
	Subtotal th		5000
	Grand Total of all Sche (Complete on last page of S		50.00
			Enter this total

on line 8a of Summary Page



MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS** 

## **DEBTS AND OBLIGATIONS**

### **SCHEDULE 1E** 2. Committee Name 1ERRY WATSON

1. Committee I.D. Number	150320	
<i>~</i>		

**CANDIDATE COMMITTEE** This Schedule itemizes: a.  $\Gamma$  Debts and obligations owed <u>by</u> or forgiven the committee b.  $\Gamma$  Debts and obligations owed <u>to</u> or forgiven <u>by</u> the committee. OR (Check either a or b. Use only for the purpose checked.) 3. Name and Mailing Address of person, vendor or 4. Type of Obligation 7. Date and amount of 8. Cumulative 9. Outstanding financial institution to whom debt is owed. (Indicate type and you may assign an expenditure code) payment to each payment Balance at close date on debt of this period Check box to indicate whether debt is owed to an 5. Indicate date debt was (hem 6 minus incorporated business. If debt is a bank loan, please incurred item 8) provide information regarding the endorsers or 6. indicate original amount guarantors, if any. of debt Debt #1 Corp? Yes 7.84 Owed to or by: 4. Type: 5. Date Debt Was Incurred: \$ 7.84 6. Original Amount of Debt FORGIVEN if bank loan, name of endorser or guarantor: Amount Endorsed: \$ Debt #2 Corp? Yes 4. Type: LUAN Owed to or by: 5. Date Debt Was Incurred: 6. Original Amount of Debt: FORGIVEN if bank loan, name of endorser or guarantor: Amount Endorsed: \$ Debt #3 Corp? Yes 4. Type: LOAN 5. Date Debt Was Incurred: 46.94 13 6. Original Amount of Debt FORGIVEN If bank loan, name of endorser or guarantor. Amount Endorsed: 5

> Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)

Page Subtotal (Outstanding debt)

Enter this total on line 12a "owed by" or line 12b "owed

234.84

234.84

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

to" of the Summary Page

Page \_



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

# DEBTS AND OBLIGATIONS SCHEDULE 1E

	Committee	I.D. Number	150320

### 2. Committee Name TERLY

DE JANGUE TWP SUPERVISIE

### **CANDIDATE COMMITTEE**

This Schedule itemizes:				<u> </u>	
a. T Debts and obligations owed by or forgiven the committee OR b. T Debts and obligations owed to or forgiven by the committee.  (Check either a or b. Use only for the purpose checked.)					
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Indicate type and you may assign an expenditure code) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)	
Debt #1 Corp? Yes Owed to or by:  TEREY L. WATSON  48 RIVERTENIL  BAY CITY M. 48164  If bank loan, name of endorser or guarantor:	4. Type: LO  5. Date Debt Was Incurred: 9. Original Amount of Debt: \$_ 155 99	12 19 108 140 150 12 19 11 1 5 Am	\$ <u>L55</u> <sup>99</sup> ount Endorsed: \$	\$   FORGIVEN	
Debt #2 Corp? Yes Owed to or by:  TELLY WATSIN  43 AWEETPEAU  BAY CITY MI 45 70(  If bank loan, name of endorser or guarantor:	4. Type: LO  5. Date Debt Was Incurred: 6. Original Amount of Debt: \$	12411108\$ 11410 -1 1 \$ -1 1 \$ -1 1 \$	\$ <u>114 00</u> .		
Debt #3 Corp? Yes	<u> </u>	Ал	nount Endorsed: \$		
Owed to or by: TERRY L. WATSON BAY CITY M. 48104	4. Type: LOAN  5. Date Debt Was Incurred: 6. Original Amount of Debt:  \$ 1/3		<u>31. 13</u>		
If bank loan, name of endorser or guarantor:	·	A	r nount Endorsed: <b>\$_</b>	·	
Page Subtotal (Outstanding debt)  Grand Total of all Schedules 1E  (Complete on last page of Schedule showing amounts owed by or to the committee)				234.84 Enter this total	
				on line 12a	

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

"owed by" or line 12b "owed to" of the Summary Page

Pana 2 no 4



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

# DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number	150320
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## . Committee Name TERRY WATSON FOR BANGOR TOWNSHIP SURPUBLIC

CANDIDATE COMMITTEE	/				
This Schedule Itemizes:					
a. $\Gamma$ Debts and obligations owed <u>by</u> or forgiven the committee OR b. $\Gamma$ Debts and obligations owed <u>to</u> or forgiven <u>by</u> the committee. (Check either a or b. Use only for the purpose checked.)					
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to Indicate whether debt is owed to an	Type of Obligation     (Indicate type and you may assign an expenditure code)     Indicate date debt was	7. Date and amount of each payment	8. Cumulative payment to date on debt	Outstanding     Balance at close     of this period     (Item 6 minus	
incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	incurred 6. Indicate original amount of debt	er yra drife eith Aedri eith	ef .	item 8)	
Debt≱f Corp? ☐ Yes Owed to or by:	4. Type: 10	12,11,08, 26,00			
DO Due COON	5. Date Debt Was Incurred:	<b>s</b>			
BOU CITU DI 48906	6. Original Amount of Debt		\$ 2600	\$	
	s. 2600	/ / \$		FORGIVEN	
If bank loan, name of endorser or guarantor:	•	Am	ount Endorsed: \$ _		
Debt #2 Corp? Yes Owed to or by:	4. Type: <u>LO</u>	140108 3200			
ARRY L WATSON	5. Date Debt Was Incurred:				
BAY CITY M. 48106	6. Original Amount of Debt:		s 32 W		
		s		FORGIVEN	
If bank loan, name of endorser or guarantor:		Arr	ount Endorsed: \$_		
Debt #3 Corp? Yes Owed to or by:	4. Type:	1211108 3415			
18 RUSETPAUL	5. Date Debt Was Incurred:		1	70 85	
BAY CITY MI H8TDG	3. Original Amount of Debt		3415	70 00	
				FORGIVEN	
If bank loan, name of endorser or guarantor:			nount Endorsed: \$_		
		Page Subtotal (Outsi	- 1	1085	
(Compk	ete on last page of Schedule show			305.69 Enter this total	
				on line 12a	

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

on line 12a "lowed by" or line 12b "owed to" of the Summary Page

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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

# DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number <u>LSO326</u>

2. Committee Name TERRY WHISON FRESHALOR TWP SINEEVISOR

#### **CANDIDATE COMMITTEE**

CANDIDATE COMMITTEE					
This Schedule itemizes:					
a. $\Gamma$ Debts and obligations owed <u>by</u> or forgiven the committee OR b. $\Gamma$ Debts and obligations owed <u>to</u> or forgiven <u>by</u> the committee. (Check either a or b. Use only for the purpose checked.)					
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.	4. Type of Obligation     (Indicate type and you may assign an expenditure code)	7. Date and amount of each payment	8. Cumulative payment to date on debt	Outstanding     Balance at close     of this period	
Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	Indicate date debt was incurred     Indicate original amount of debt	ungt brivati keRI	ef .	(Item 6 minus Item 8)	
Debt#1 Corp? Yes Owed to or by:	4. Type: LUAN		··		
TERRY L. WATSON	5. Date Debt Was Incurred:				
43 KINERTRAIL	6. Original Amount of Debt:		•	\$ 21800	
BAY CITY MI 48TOLE	s. 218 <sup>20</sup>		***************************************	FORGIVEN	
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$		
Debt #2 Corp? Yes Owed to or by:	4. Type: <u>LOP N</u>	_/			
TERRY L WATSON	5. <u>Date Debt Was Incurred</u> :				
BAY CUTU MI 4810CO	6. Original Amount of Debt:		\$	He GLF	
Drig (119 1811 40 104)	\$ 44.64			FORGIVEN	
If bank loan, name of endorser or guarantor:			ount Endorsed: \$	L PORGIVER	
Debt#3 Corp? ☐ Yes					
Owed to or by:	4. Type: <u>LOBN</u>	_/			
OR ENTROPORT	5. Date Debt Was Incurred:	/ 1 \$ ·		44	
BAG CITY MI HSTOG	6. Original Amount of Debt:			450 00	
	\$ 45000			FORGIVEN	
If bank loan, name of endorser or guarantor:	•	An	nount Endorsed: \$_		
		Page Subtotal (Outst	anding debt)	11/11/	
Count Total of all Cabadulas 4E				114.64	
(Complete on last page of Schedule showing amounts owed by or to the committee)				1020.33	

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

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